



KSF INTERNATIONAL

SCHOLARSHIP RECIPIENT CHANGE FORM

Instructions:

1. Please print clearly all the information.
2. Scan and turn in completed application, with all applicable signatures and stamps to KSF International at info@helptokenya.org.
3. If this form is incomplete, inaccurate, or not signed, it may not be considered.

Today's Date:	
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Name of School:	
Address:	
Telephone number:	
Email Address:	

STUDENTS TO BE DISCONTINUED:

Student's Name (first, middle & last)	REASON FOR CHANGE (check appropriate box)		
	Student Graduating	Student stopped attending school	Other reason (explain)
1.			
2.			
3.			

STUDENTS TO BE ADDED:

PROPOSED REPLACEMENT STUDENTS (first, middle & last)	Form/Grade	Student Application Form Attached (Y/N)
1.		
2.		
3.		

I certify that the statements herein are true to the best of my knowledge and grant permission for the information contained herein to be shared with the scholarship selection committee(s) and scholarship donor(s).

For Headmaster/Headmistress:

Print Complete Name

Signature

Official school stamp



For KSF International Use Only:

Date form received: _____

KSF International Officer's Signature: _____